| Company of the second of the s | |
|--|--|
| Case 2:06-cv SENDER: COMPLETE THIS SECTION OF 13 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, | A. Signature X Agent B. Redeived by (Printed Name) COMPLETE THIS SECTION ON DELIVERY Addressee C. Date of Delivery |
| Geo Marine, Inc. c/o Ruben Garza, CEO 550 E 15th St. Plano, TX 75074 | D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No A: OUCUYD O-WHA 510 |
| | 3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D. 4. Restricted Delivery? (Extra Fee) Yes |
| 2. Article Number 7003 2260 | 0004 5051 1873 |

PS Form 3811, August 2001

(Transfer from service I

Domestic Return Receipt

102595-02-M-1540